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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Registration So Division of Con			
Lake Dora,	, LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jennifer Carson		
		Name of Person	
		Firm/Company	
	1236 W. King Street		
		Address	
	Cocoa, FL 32922		
		City/State and Zip Code	
	jennycarsoп4@gmail.com		
		to be used for future annual report notifi	cation)
For further information of	concerning this matter, please c	all:	
Jennifer Carson		321 480-9867	
Name o	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lake Dora, LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on October 11, 2016 and assigned Florida document number 1.16000188347
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)

3. If amending the registered agent and/or registered office address on our records, enter the name of the ne
Name of New Registered Agent: Tennifer CArson
New Registered Office Address:
Enter Florida street address Florida
City Zip Code
New Registered Agent's Signature, if changing Registered Agent:
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR Justin Birbal	Justin Birbal	1236 W. King St.	
		Cocoa, FL 32922	■ Remove
			Change
MGR Jason Birba!	Jason Birba!	1236 W. King St.	Add
		Cocoa, FL 32922	
			Change
MGR	Jennifer Carson	1236 W. King St.	∃ Add
		Cocoa, FL 32922	Remove
			☐ Change
			□ Remove
			Change
			O Add
			□ Remove
			Change
		O Add	
			☐ Remove
			☐ Change

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effec	tive date, if other than the date of filing: 3/15/14 (optional)
(If an el Note:	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as.
docur	nent's effective date on the Department of State's records.
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
	e 90th day after the record is filed.
Dated	
	Signature of a member or authorized representative of a member
	$\mathcal{L}_{\mathcal{L}}}}}}}}}}$
	Typed or printed name of signee

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Filing Fee: \$25.00